

## Passive Parental Permission Form

Our school is taking part in the 2025 Youth Risk Behavior Survey (YRBS) sponsored by the New Hampshire Department of Health and Human Services and Department of Education. The survey will ask about the health behaviors and experiences of 9th through 12th grade students. The survey will ask about nutrition, physical activity, sexual or physical violence, injuries, and tobacco, alcohol, and other drug use. It will also ask about sexual behaviors that could lead to pregnancy and sexually transmitted infections, including HIV.

Students will be asked to fill out a survey that takes about 35 minutes to complete.

Participating in this survey will cause little or no risk to your child. The only potential risk is that some students might find certain questions to be sensitive. **The survey has been designed to protect your child's privacy.** Students will not provide their names or student ID number. Also, no school or student will ever be mentioned by name in a report of the results. For the survey results to be accurate, it is important that all students, regardless of whether they have engaged in health-risk behaviors, are given an opportunity to participate in the survey, but the **survey is voluntary**. No action will be taken against the school, you, or your child if your child does not take the survey. Students may skip any questions they do not wish to answer. In addition, students may stop taking the survey at any point without penalty. If you would like to see the survey, a copy is available at <https://www.dhhs.nh.gov/programs-services/population-health/health-statistics-informatics/youth-risk-behavior-survey>.

Complete the section below and return it to the school within 3 days **only if you do not** want your child to take part in the survey. If you have additional questions about the survey your child's teacher or principal cannot answer, please contact the Department of Health and Human Services at [DHHS.NH.Youth.Risk@dhhs.nh.gov](mailto:DHHS.NH.Youth.Risk@dhhs.nh.gov). Thank you.

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Please complete this section of the form **only if you do not** want your child to participate in the survey.

Student's name: \_\_\_\_\_ Grade: \_\_\_\_\_

I have read this form and know what the survey is about.

[ ] NO, my child may **not** take part in this survey.

Parent's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone number: \_\_\_\_\_